EZ	United State	-			;			Voluntary	Petition
Name of Debtor (if individual, enter Last, First, M	iiddle):			Nam	ne of Joint D	ebtor (Spou	se)(Last, First, Midd	lle):	
Bonaparte, Stephenson									
All Other Names used by the Debtor in the la (include married, maiden, and trade names): NONE	ast 8 years					s used by the anaiden, and trad	Joint Debtor in t e names):	the last 8 years	
Last four digits of Soc. Sec. or Indvidual-Taxpayer I (if more than one, state all): 4814	I.D. (ITIN) No./Comp	lete EIN			four digits of S		vidual-Taxpayer I.	.D. (ITIN) No./Comple	ete EIN
Street Address of Debtor (No. & Street, City 263 Winthrop St. Apt 1st Floor				Stree	et Address of	f Joint Debtor	(No. & Stree	et, City, and State):	
Brooklyn, NY	_	ZIPCODE							ZIPCODE
		11225		-	. CD 11	6.1			
County of Residence or of the Principal Place of Business: Kings					nty of Reside cipal Place o	ence or of the of Business:			
Mailing Address of Debtor (if different from	street address):			Mail	ing Address	of Joint Debt	tor (if differen	t from street address):	
SAME		ZIPCODE							ZIPCODE
Location of Principal Assets of Business Del (if different from street address above): NOT API	otor PLICABLE								ZIPCODE
Type of Debtor (Form of organization)	Nature (Check one	of Busines	s		Chapter	of Bankrupt (Check on	•	r Which the Petitio	n is Filed
(Check one box.) ✓ Individual (includes Joint Debtors) See Exhibit D on page 2 of this form.	Health Care Bu	siness eal Estate as defi	ned		Chapter 7 Chapter 9 Chapter 1			hapter 15 Petition for a Foreign Main Pr	roceeding
Corporation (includes LLC and LLP) Partnership	in 11 U.S.C. §	101 (51B)			Chapter 1 Chapter 1	3	□ of	hapter 15 Petition for f a Foreign Nonmain	
Other (if debtor is not one of the above entities, check this box and state type of entity below	Stockbroker Commodity Bro	oker		\boxtimes	in 11 U.S.C	. § 101(8) as brimarily for a	Debts (Che umer debts, defi "incurred by an a personal, famil	busin	ts are primarily ness debts.
Chapter 15 Debtors Country of debtor's center of main interests: Each country in which a foreign proceeding by,	(Check box	empt Entit x, if applicable.) exempt organiza of the United Sta	ition	_ De		all business a		U.S.C. § 101(51D). ined in 11 U.S.C. §	101(51D).
regarding, or against debtor is pending:	Code (the Inter	nal Revenue Co	de).		20101 15 1101 4	Sinui ousine	is debtor as den	med in 11 c.s.c. ş	101(312).
Filing Fee (Check Full Filing Fee attached Filing Fee to be paid in installments (applicable attach signed application for the court's consider is unable to pay fee except in installments. Rule Filing Fee waiver requested (applicable to chapt attach signed application for the court's consider.	to individuals only). Mation certifying that th 1006(b). See Official er 7 individuals only).	e debtor Form 3A. Must	-	Chec	ebtor's aggre yed to insider 4/01/16 and of the aggregation of the ek all application of the aggregation of the aggregation of the aggregation of the aggregation of the aggregation of the aggregation of	rs or affiliates every three year 	are less than \$ \text{irs thereafter}.	d debts (excluding de 2,490,925 (amount s	rubject to adjustment
Statistical/Administrative Information								THIS SPACE IS FOR	COURT USE ONLY
Debtor estimates that funds will be available for Debtor estimates that, after any exempt proper distribution to unsecured creditors.			nses paid,	, there v	will be no fund	ls available for			
Estimated Number of Creditors	99 1,000- 5,000	5,001- 10,000	10,001- 25,000		25,001- 50,000	50,001- 100,000	Over 100,000		
Estimated Assets S0 to \$50,001 to \$100,001 to \$500, \$50,000 \$100,000 \$500,000 to \$1 million	\$1,000,001 to \$10	\$10,000,001 to \$50 million	\$50,000 to \$100 million		\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion	More than \$1 billion		
Estimated Liabilities S0 to \$50,001 to \$100,001 to \$500,000 \$50,000 \$500,000 to \$1 or sile.	001 \$1,000,001 to \$10	\$10,000,001 to \$50	\$50,000 to \$100		\$100,000,001 to \$500	\$500,000,001 to \$1 billion	More than \$1 billion		

B1 (Official Form 1) (4/13) FORM B1, Page Name of Debtor(s): Voluntary Petition (This page must be completed and filed in every case) Stephenson Bonaparte All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Location Where Filed: Case Number: Date Filed: NONE Location Where Filed: Case Number: Date Filed: (If more than one, attach additional sheet) Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor Name of Debtor: Date Filed: NONE District: Relationship: Judge: Exhibit A Exhibit B (To be completed if debtor is required to file periodic reports (To be completed if debtor is an individual (e.g., forms 10K and 10Q) with the Securities and Exchange whose debts are primarily consumer debts) Commission pursuant to Section 13 or 15(d) of the Securities I, the attorney for the petitioner named in the foregoing petition, declare that I Exchange Act of 1934 and is requesting relief under Chapter 11) have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I have delivered to the debtor the notice required by 11 U.S.C. §342(b). Exhibit A is attached and made a part of this petition /s/ Raymond Ragues Signature of Attorney for Debtor(s) Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and exhibit C is attached and made a part of this petition. \boxtimes No Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D, completed and signed by the debtor, is attached and made part of this petition. If this is a joint petition: Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes.) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(1)).

B1 (Official Form 1) (4/13)

FORM B1, Page 3 Name of Debtor(s): **Voluntary Petition** (This page must be completed and filed in every case) Stephenson Bonaparte **Signatures** $Signature(s) \ of \ Debtor(s) \ (Individual/Joint)$ Signature of a Foreign Representative I declare under penalty of perjury that the information provided in this I declare under penalty of perjury that the information provided in this petition is true and correct. [If petitioner is an individual whose debts are primarily consumer debts petition is true and correct, that I am the foreign representative of a debtor and has chosen to file under chapter 7] I am aware that I may proceed in a foreign proceeding, and that I am authorized to file this petition. under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to (Check only one box.) proceed under chapter 7. I request relief in accordance with chapter 15 of title 11, United States [If no attorney represents me and no bankruptcy petition preparer Code. Certified copies of the documents required by 11 U.S.C. § 1515 signs the petition] I have obtained and read the notice required by are attached. 11 U.S.C. §342(b) Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the I request relief in accordance with the chapter of title 11, United States chapter of title 11 specified in this petition. A certified copy of the Code, specified in this petition. order granting recognition of the foreign main proceeding is attached. X /s/ Stephenson Bonaparte Signature of Debtor (Signature of Foreign Representative) Signature of Joint Debtor (Printed name of Foreign Representative) Telephone Number (if not represented by attorney) (Date) Signature of Attorney* Signature of Non-Attorney Bankruptcy Petition Preparer X /s/ Raymond Ragues I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for Signature of Attorney for Debtor(s) compensation and have provided the debtor with a copy of this document Raymond Ragues and the notices and information required under 11 U.S.C. \$\$ 110(b), 110 (h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. \$ 110(h) setting a maximum fee for services Printed Name of Attorney for Debtor(s) Ragues PLLC bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached. 33 Gold Street, Suite 620 New York, NY 10038 Printed Name and title, if any, of Bankruptcy Petition Preparer 212-766-1100 Telephone Number Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social-Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.) *In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect. Address Signature of Debtor (Corporation/Partnership) I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor. Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social-Security number is provided The debtor requests the relief in accordance with the chapter of title 11, United States Code, specified in this petition. Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual. Signature of Authorized Individual Printed Name of Authorized Individual If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person. Title of Authorized Individual A bankruptcy petition preparer's failure to comply with the provisions of title II and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156. Date

Fill in this ir	nformation to id	lentify your case:	
Debtor 1	Stephenson Bo	naparte	
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States E	Bankruptcy Court fo	or the: EASTERN	District of NEW YORK (State)
Case number (If known)			

Check one box only as directed in this form and in Form 22A-1Supp:
1. There is no presumption of abuse.
 2. The calculation to determine if a presumption of abuse applies will be made under <i>Chapter 7 Means</i> <i>Test Calculation</i> (Official Form 22A–2).
☐ 3. The Means Test does not apply now because of qualified military service but it could apply later.

☐ Check if this is an amended filing

Official Form 22A-1

Chapter 7 Statement of Your Current Monthly Income

12/14

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file *Statement of Exemption from Presumption of Abuse Under* § 707(b)(2) (Official Form 22A-1Supp) with this form.

Part	1.	C_{2}

Calculate Your Current Monthly Income

- 1. What is your marital and filing status? Check one only.
 - Not married. Fill out Column A, lines 2-11.
 - Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.
 - ☐ Married and your spouse is NOT filing with you. You and your spouse are:
 - Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.
 - Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B).

Column A

Column B

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

		Debtor 1	Debtor 2 or non-filing spouse
2.	Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	\$_1083.33_	\$0.00
3.	Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.	\$0.00_	\$0.00
4.	All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.	\$0.00_	\$0.00_
5.	Net income from operating a business, profession, or farm Gross receipts (before all deductions) \$ 0.00		
	Ordinary and necessary operating expenses -\$0.00		
	Net monthly income from a business, profession, or farm \$0.00 Copy here→	\$0.00_	\$0.00
6.	Net income from rental and other real property Gross receipts (before all deductions) \$_0.00\$		
	Ordinary and necessary operating expenses - \$0.00_		
	Net monthly income from rental or other real property \$0.00 copy here→	\$0.00_	\$0.00
7.	Interest, dividends, and royalties	\$0.00_	\$0.00

Debtor 1	Stephenson Bonaparte		Case num	her (if known)			
Debloi	First Name Middle Name Last Name		Case Hulli	Dei (II kriowri)			
			Colun		Colum Debto non-fi		
8. U r	employment compensation		\$	0.00	\$	0.00	
	onot enter the amount if you contend that the amount reder the Social Security Act. Instead, list it here:		,		· · ·		
	For you	\$0.00					
	For your spouse	\$0.00					
	ension or retirement income. Do not include any amonefit under the Social Security Act.	unt received that was a	\$	0.00	. \$	0.00	
D _e	come from all other sources not listed above. Specto not include any benefits received under the Social Sea victim of a war crime, a crime against humanity, or intercrism. If necessary, list other sources on a separate p	curity Act or payments receivnternational or domestic					
1	0a		\$	0	\$	0	
1	0b		\$		\$		
1	0c. Total amounts from separate pages, if any.		+\$		+ \$		
	alculate your total current monthly income. Add line lumn. Then add the total for Column A to the total for Column A		\$_1	083.33	+	0.00	Total current monthly income
Part	2: Determine Whether the Means Test App	olies to You					
12. C a	Iculate your current monthly income for the year. F	Follow these steps:					
12	a. Copy your total current monthly income from line 1	1		Сор	y line 11 he	ere → 12a.	\$_1083.33_
	Multiply by 12 (the number of months in a year).					_	x 12
12	b. The result is your annual income for this part of the	e form.				12b.	\$_12999.96_
13. C a	alculate the median family income that applies to yo	ou. Follow these steps:					
Fi	I in the state in which you live.	NEW YORK					
Fi	I in the number of people in your household.	2.00				г	
	I in the median family income for your state and size of					13.	\$ <u>60743.00</u>
	find a list of applicable median income amounts, go o structions for this form. This list may also be available a			ate			
	ow do the lines compare?						
	Line 12b is less than or equal to line 13. On the Go to Part 3.						
14	b. Line 12b is more than line 13. On the top of pag Go to Part 3 and fill out Form 22A–2.	e 1, check box 2, <i>The presun</i>	nption of ab	use is de	termined b	y Form 22A-	2.
Part	3: Sign Below						
	By signing here, I declare under penalty of perjur	y that the information on this	statement a	and in any	attachme	nts is true an	d correct.
	/s/ Stephenson Bonaparte	× _					
	Signature of Debtor 1	S	Signature of D	Debtor 2			
	Date		Date	DD / YYY	Υ		
	If you checked line 14a, do NOT fill out or file For	m 22A–2.					
	If you checked line 14h, fill out Form 22A–2 and						

UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF NEW YORK

In re Stephenson Bonaparte	Case No. (if known)
Debtor(s)	<u> </u>
EXHIBIT D - INDIVIDUAL DEBTOR'S STATEM CREDIT COUNSELING REQ	
WARNING: You must be able to check truthfully one of the five statements regarding do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case whatever filing fee you paid, and your creditors will be able to resume collection activities you file another bankruptcy case later, you may be required to pay a second filing fee ar creditors' collection activities.	you do file. If that happens, you will lose es against you. If your case is dismissed and
Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse mus Exhibit D. Check one of the five statements below and attach any documents as directed.	at complete and file a separate
1. Within the 180 days before the filing of my bankruptcy case , I received agency approved by the United States trustee or bankruptcy administrator that outlined the oppor counseling and assisted me in performing a related budget analysis, and I have a certificate from services provided to me. Attach a copy of the certificate and a copy of any debt repayment plant.	rtunities for available credit the agency describing the
2. Within the 180 days before the filing of my bankruptcy case , I received agency approved by the United States trustee or bankruptcy administrator that outlined the oppor counseling and assisted me in performing a related budget analysis, but I do not have a certificat the services provided to me. You must file a copy of a certificate from the agency describing the a copy of any debt repayment plan developed through the agency no later than 14 days after your provided to the control of the con	rtunities for available credit te from the agency describing te services provided to you and
3. I certify that I requested credit counseling services from an approved agency be	out was unable to obtain the

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver

of the credit counseling requirement so I can file my bankruptcy case now.

[Summarize exigent circumstances here.]

4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement]

[Must be accompanied by a motion for determination by the court.]

Incapacity. (Defined in 11 U.S.C. § 109 (h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

Disability. (Defined in 11 U.S.C. § 109 (h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

Active military duty in a military combat zone.

5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor:

/s/ Stephenson Bonaparte

B 1D (Official Form 1, Exhibit D) (12/09)

Date:

Fill in this in	formation to id	entify your case:	
Debtor 1	Stephenson Bo	onaparte	
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
	Bankruptcy Court	EASTEDNI	District of NEW YORK (State)
Case number (If known)			

Check the appropriate box as directed in lines 40 or 42:
According to the calculations required by this Statement:
1. There is no presumption of abuse.
2. There is a presumption of abuse.
☐ Check if this is an amended filing

Official Form 22A–2

Chapter 7 Means Test Calculation

12/14

To fill out this form, you will need your completed copy of Chapter 7 Statement of Your Current Monthly Income (Official Form 22A-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Determine Your Adjusted Income				
Copy your total current monthly income	Copy line 11 from Officia	al Form 22A-1 here →1.	\$	0.00
2. Did you fill out Column B in Part 1 of Form 22A-1?				
☑ No. Fill in \$0 on line 3d.				
☐ Yes. Is your spouse filing with you?				
✓ No. Go to line 3.				
☐ Yes. Fill in \$0 on line 3d.				
Adjust your current monthly income by subtracting any part of your shousehold expenses of you or your dependents. Follow these steps: On line 11, Column B of Form 22A–1, was any amount of the income you				
used for the household expenses of you or your dependents?	roportou for your opoudo rec	or regularly		
☑ No. Fill in 0 on line 3d.				
☐ Yes. Fill in the information below:				
State each purpose for which the income was used For example, the income is used to pay your spouse's tax debt or to support people other than you or your dependents	Fill in the amount you are subtracting from your spouse's income			
3a	\$0.00_			
3b	\$0.00_			
3c	+ \$0.00			
3d. Total. Add lines 3a, 3b, and 3c	\$0.00	Copy total here →3d.	- \$	0.00
4. Adjust your current monthly income. Subtract line 3d from line 1.			\$	0.00

Stephenson Bonaparte Debtor 1 Case number (if known) First Name Middle Name Last Name Part 2: Calculate Your Deductions from Your Income The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office. Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not deduct any amounts that you subtracted from your spouse's income in line 3 and do not deduct any operating expenses that you subtracted from income in lines 5 and 6 of Form 22A-1. If your expenses differ from month to month, enter the average expense. Whenever this part of the form refers to you, it means both you and your spouse if Column B of Form 22A-1 is filled in. 5. The number of people used in determining your deductions from income Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from 2 the number of people in your household. **National Standards** You must use the IRS National Standards to answer the questions in lines 6-7. 6. Food, clothing, and other items: Using the number of people you entered in line 5 and the IRS National Standards, fill 0.00 in the dollar amount for food, clothing, and other items. 7. Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories—people who are under 65 and people who are 65 or older—because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22. People who are under 65 years of age Out-of-pocket health care allowance per person 0.00 7b. Number of people who are under 65 0.00 Copy line 7c 0.00 0.00 Subtotal. Multiply line 7a by line 7b. People who are 65 years of age or older Out-of-pocket health care allowance per person 0.00 7e. Number of people who are 65 or older X 0.00 Copy line 7f 0.00 Subtotal. Multiply line 7d by line 7e. 0.00 here Copy total here 0.00 Total. Add lines 7c and 7f..... 0.00

Seased on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy surposes into two parts: It housing and utilities — Mortgage or rent expenses It housing and utilities — Mortgage or rent expenses To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the anatypotry circles office. Housing and utilities — Insurance and operating expenses: Using the number of people you entered in line 5, fill in the dollar amount listed for your county for insurance and operating expenses: So. Using the number of people you entered in line 5, fill in the dollar amount listed for your county for mortgage or rent expenses: So. Using the number of people you entered in line 5, fill in the dollar amount listed for your county for mortgage or rent expenses. So. Using the number of people you entered in line 5, fill in the dollar amount listed for your county for mortgage or rent expenses. So. Using the number of people you entered in line 5, fill in the dollar amount listed for your county for mortgage or rent expenses. So. Using the number of people you entered in line 5, fill in the dollar amount listed for your county for mortgage or rent expenses. So. Using the number of people you entered in line 5, fill in the dollar amount listed for your county for mortgage or rent expenses. So. Used the total average monthly payment for all mortgages and other debts secured by your home. So. Opyline 9b	otor 1		son Bonaparte	Case number (if known)	
Sased on Information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy burposes into two parts: I Housing and utilities — Insurance and operating expenses I Housing and utilities — Mortgage or rent expenses To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the anatyputcy clark's office. Housing and utilities — Insurance and operating expenses: Using the number of people you entered in line 5, fill in the dollar amount listed for your county for insurance and operating expenses. 9a. Using the number of people you entered in line 5, fill in the dollar amount listed for your county for mortgage or rent expenses: 9a. Using the number of people you entered in line 5, fill in the dollar amount listed for your county for mortgage or rent expenses. 9a. Total average monthly payment for all mortgages and other debts secured by your home. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 90. Name of the creditor S. 0. Name of the creditor S. 0.00 Repeat this amount is less than \$0, enter \$0. S. 0.00 Copy line 9b — \$ 0.00 Repeat this file 50. Repeat this file 50. Repeat this file 50. To you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and affects the calculation of your monthly expenses, fill in any additional amount you claim. Explain 1. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense. 2. Vehicle operation expenses: Using the IRS Local Standards and the number of vehicles for which you claim the		First Name	Middle Name Last Name		
Wousing and utilities – Insurance and operating expenses Housing and utilities – Mortgage or rent expenses To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go ceiline using the link specified in the separate instructions for this form. This chart may also be available at the anatypative derive of office. Housing and utilities – Insurance and operating expenses: Using the number of people you entered in line 5, fill in the dollar amount listed for your county for insurance and operating expenses. Housing and utilities – Mortgage or rent expenses: So. Housing and utilities – Mortgage or rent expenses: So. Housing and utilities – Mortgage or rent expenses: So. Housing and utilities – Mortgage or rent expenses: So. Total average monthly payment for all mortgages and other debts secured by your home. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you fille for bankruptcy. Then divide by 60. Name of the creditor Average monthly payment So. O. Name of the creditor Average monthly payment So. O. So. O. Respect this amount is less than \$0, enter \$0. So. O. Respect this amount is less than \$0, enter \$0. So. O. Respect this amount is less than \$0, enter \$0. The calculation of your monthly expenses, fill in any additional amount you claim. Explain Why: 1. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense. 2. Vehicle operation expenses: Using the IRS Local Standards and the number of vehicles for which you claim the	Local S	tandards	You must use the IRS Local Star	ndards to answer the questions in lines 8-15.	
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Stephenson Bonaparte

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16. Taxes: The total monthly amount that you will actually owe for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes. Do not include real estate, sales, or use taxes. 17. Involuntary deductions: The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs. Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings. 18. Life insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filling together, include payments that you make for your spouse's iter life insurance. Do not include premiums for life insurance on your dependents, for a non-filling spouse's life insurance, or for any form of life insurance other than term. 19. Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35. 20. Education: The total monthly amount that you pay for education that is either required: a sa a condition for your job, or for your physically or mentally challenged dependent child if no public education is available for similar services. 1. Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. Do not include payments for any elementary or secondary school education. 2. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents	Other Necessary Expenses	In addition to the expense deductions listed above, you are allowed your monthly expenses for the following IRS categories.	
union dues, and uniform costs. Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings. 18. Life insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filling together, include payments that you make for your spouse's leff insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term. 19. Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35. 20. Education: The total monthly amount that you pay for education that is either required: a as a condition for your job, or for your physically or mentally challenged dependent child if no public education is available for similar services. 21. Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. Do not include payments for any elementary or secondary school education. 22. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7. Payments for health insurance or health savings accounts should be listed only in line 25. 23. Optional telephones and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is n	employment taxes, social se pay for these taxes. Howeve subtract that number from th	ecurity taxes, and Medicare taxes. You may include the monthly amount withheld from your err, if you expect to receive a tax refund, you must divide the expected refund by 12 and se total monthly amount that is withheld to pay for taxes.	\$0.00_
Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings. 18. Life insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term. 19. Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35. 20. Education: The total monthly amount that you pay for education that is either required: as a condition for your job, or for your physically or mentally challenged dependent child if no public education is available for similar services. 21. Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. Do not include payments for any elementary or secondary school education. 22. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7. Payments for health insurance or health savings accounts should be listed only in line 25. 23. Optional telephones and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employ			
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expenses, such as those reported on line 5 of Official Form 22A-1, or any amount you previously deducted.	you and your dependents, so service, to the extent necess is not reimbursed by your en	uch as pagers, call waiting, caller identification, special long distance, or business cell phone sary for your health and welfare or that of your dependents or for the production of income, if it inployer.	+ \$ 0.00
24. Add all of the expenses allowed under the IRS expense allowances.			
Add lines 6 through 23.		owed under the IRS expense allowances.	\$0.00_

Stephenson Bonaparte

Debtor 1 Case number (if known) First Name Middle Name Last Name **Additional Expense Deductions** These are additional deductions allowed by the Means Test. Note: Do not include any expense allowances listed in lines 6-24. 25. Health insurance, disability insurance, and health savings account expenses. The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or your dependents. 0.00 Health insurance 0.00 Disability insurance 0.00 Health savings account \$ 0.00 0.00 \$ Total Copy total here Do you actually spend this total amount? ☑ No. How much do you actually spend? 0.00 ☐ Yes 26. Continued contributions to the care of household or family members. The actual monthly expenses that you will 0.00 continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. 27. Protection against family violence. The reasonably necessary monthly expenses that you incur to maintain the safety 0.00 of you and your family under the Family Violence Prevention and Services Act or other federal laws that apply. By law, the court must keep the nature of these expenses confidential. 28. Additional home energy costs. Your home energy costs are included in your non-mortgage housing and utilities allowance on line 8. If you believe that you have home energy costs that are more than the home energy costs included in the non-mortgage 0.00 housing and utilities allowance, then fill in the excess amount of home energy costs. You must give your case trustee documentation of your actual expenses, and you must show that the additional amount claimed is reasonable and necessary. 29. Education expenses for dependent children who are younger than 18. The monthly expenses (not more than \$156.25* per child) that you pay for your dependent children who are younger than 18 years old to attend a private or public elementary or secondary school. 0.00 You must give your case trustee documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in lines 6-23. Subject to adjustment on 4/01/16, and every 3 years after that for cases begun on or after the date of adjustment. 0.00 30. Additional food and clothing expense. The monthly amount by which your actual food and clothing expenses are higher than the combined food and clothing allowances in the IRS National Standards. That amount cannot be more than 5% of the food and clothing allowances in the IRS National Standards. To find a chart showing the maximum additional allowance, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. You must show that the additional amount claimed is reasonable and necessary. 0.00 31. Continuing charitable contributions. The amount that you will continue to contribute in the form of cash or financial instruments to a religious or charitable organization. 26 U.S.C. § 170(c)(1)-(2). 0.00 32. Add all of the additional expense deductions. Add lines 25 through 31.

Debtor 1

Stephen	son Bonaparte		Case number (if known)
First Name	Middle Name	Last Name	

33. For debts that are secured by an interest in property that you own, including home mortgages, vehicle loans, and other secured debt, fill in lines 33a through 33g.

To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.

Mortgages on your home:			Average n	nonthly		
33a. Copy line 9b here			\$	0.00		
Loans on your first two vehicles:						
33b. Copy line 13b here			\$	0.00		
33c. Copy line 13e here		······ →	\$	0.00		
Name of each creditor for other secured debt	Identify property that secures the debt	Does payment include taxes or insurance?				
33d		✓ No ☐ Yes	\$	0.00		
33e		✓ No✓ Yes	\$	0.00		
33f		☑ No □ Yes	+ \$	0.00		
33g. Total average monthly payment. Add lines	33a through 33f		\$	0.00	Copy total here	\$ 0.00

- 34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents?
 - No. Go to line 35.
 - Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the *cure amount*). Next, divide by 60 and fill in the information below.

Name of the creditor	Identify property that secures the debt	Total cure amount		Monthly cure amount
		\$0.00_	÷ 60 =	\$0.00
		\$0.00	÷ 60 =	\$0.00
		\$0.00	÷ 60 =	+ \$0.00
			Total	\$0.00

- 35. Do you owe any priority claims such as a priority tax, child support, or alimony—that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507.
 - No. Go to line 36.
 - ☐ Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19.

Total amount of all past-due priority claims

 $0.00 \div 60 =$

\$___0.00

Debtor 1	Stepher	nson Bonaparte			Ca	ase number (if kn	own)			
	First Name	Middle Name	Last Name			200 mamber (# m.)	o,			
İ	For more informinstructions for	le to file a case und nation, go online usin this form. Bankrupto	ng the link for <i>Bankru</i>	ptcy Basics	specified in the se					
	No. Go to lir	ne 37.								
	Yes. Fill in th	e following information	on.							
	Project	ed monthly plan payr	ment if you were filing	g under Cha	apter 13	\$	0.00	-		
	Admini North C	t multiplier for your di strative Office of the Carolina) or by the Ex istricts).	United States Courts	(for district	s in Alabama and	x <u>0</u>	.00_			
	link spe	a list of district multipecified in the separate le at the bankruptcy	e instructions for this					¥		
	Averag	e monthly administra	itive expense if you w	vere filing ui	nder Chapter 13	\$	0.00	here	\$0.00	
	dd all of the de	eductions for debt p ough 36.	payment.						\$0.00	
Total	Deductions fr	rom Income								
38. A c	dd all of the all	lowed deductions.								
		of the expenses allow ces		. \$	0.00					
Co	py line 32, All o	of the additional expe	ense deductions	. \$	0.00					
Co	py line 37, All o	of the deductions for	debt payment	+\$	0.00					
Tot	tal deductions			\$	0.00	Copy total h	ere 👈		\$0.00_	
Part	3: Determ	nine Whether The	ere Is a Presumpt	ion of Abı	use					
39. C a	alculate month	nly disposable inco	me for 60 months							
39	9a. Copy line 4	4, adjusted current m	onthly income	\$	0.00					
39	9b. Copy line 3	38, Total deductions.		- \$	0.00					
39	-	sposable income. 11 ne 39b from line 39a.	- ',',	\$	0.00	Copy line 39c here	\$	0.00		
	For the ne	ext 60 months (5 year	rs)			-	x 60			
3	9d. Total . Mul	tiply line 39c by 60				39d.	\$	0.00 Copy line 39 here	0 00 1	
40. Fi	nd out whether	er there is a presum	ption of abuse. Che	ck the box	that applies:					
	The line 39d to Part 5.	is less than \$7,475	*. On the top of page	1 of this for	rm, check box 1, 7	There is no pre	esumption of a	abuse. Go		
		is more than \$12,4° art 4 if you claim spe				, There is a pr	resumption of	abuse. You		
		is at least \$7,475*,								
	* Subject to	adjustment on 4/01/1	16, and every 3 years	after that f	or cases filed on o	r after the date	e of adjustme	ent.		

Stephenson Bonaparte

Debtor 1	Stephenson Bonaparte	Case number (if known)	
	First Name Middle Name Last Name	,	
	Fill in the amount of your total nonpriority unsecured debt. If y Summary of Your Assets and Liabilities and Certain Statistical Info. (Official Form 6), you may refer to line 5 on that form.		0.00
41b.	25% of your total nonpriority unsecured debt. 11 U.S.C. § 707(Multiply line 41a by 0.25.	b)(2)(A)(i)(I) \$	0.00 Copy
is end	mine whether the income you have left over after subtracting a bugh to pay 25% of your unsecured, nonpriority debt. If the box that applies:	II allowed deductions	
	ne 39d is less than line 41b. On the top of page 1 of this form, choo to Part 5.	eck box 1, There is no presumption of a	abuse.
☐ Li of	ne 39d is equal to or more than line 41b. On the top of page 1 of abuse. You may fill out Part 4 if you claim special circumstances.	this form, check box 2, <i>There is a pres</i> hen go to Part 5.	umption
Part 4:	Give Details About Special Circumstances		
Preasonal No. (ave any special circumstances that justify additional expenses on alternative? 11 U.S.C. § 707(b)(2)(B). Go to Part 5. Fill in the following information. All figures should reflect your average for each item. You may include expenses you listed in line 25. You must give a detailed explanation of the special circumstances to adjustments necessary and reasonable. You must also give your catexpenses or income adjustments.	ge monthly expense or income adjustm	ent
	Give a detailed explanation of the special circumstances		monthly expense ne adjustment
		\$ 	0.00
		\$	0.00
		\$	0.00
Part 5: S	Sign Below		
E	By signing here, I declare under penalty of perjury that the information	on on this statement and in any attachm	nents is true and correct.
•	✗ /s/ Stephenson Bonaparte	x	
	Signature of Debtor 1 Stephenson Bonaparte	Signature of Debtor 2	
	Date MM / DD / YYYY	Date	

UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF NEW YORK

In the Stephenson Bonaparte	ase No. napter	
/ Debtor		

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data"if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	Attached (Yes/No)	No. of Sheets	ASSETS	LIABILITIES	OTHER
A-Real Property	Yes	1	\$ 0.00		
B-Personal Property	Yes	3	\$ 1,007.00		
C-Property Claimed as Exempt	Yes	1			
D-Creditors Holding Secured Claims	Yes	1		\$ 0.00	
E-Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		\$ 0.00	
F-Creditors Holding Unsecured Nonpriority Claims	Yes	3		\$ 10,798.09	
G-Executory Contracts and Unexpired Leases	Yes	1			
H-Codebtors	Yes	1			
I-Current Income of Individual Debtor(s)	Yes	1			\$ 1,083.33
J-Current Expenditures of Individual Debtor(s)	Yes	1			\$ 2,195.00
ТОТ	AL	14	\$ 1,007.00	\$ 10,798.09	

UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF NEW YORK

IN TE Stephenson Bonaparte		Case No. Chapter	7
	/ Debtor		

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8), filing a case under chapter 7, 11, or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$0.00
Student Loan Obligations (from Schedule F)	\$0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$0.00
TOTAL	\$0.00

State the following:

Average Income (from Schedule I, Line 12)	\$1,083.33
Average Expenses (from Schedule J, Line 22)	\$2,195.00
Current Monthly Income (from Form 22A-1 Line 11: OR. Form 22B Line 14: OR. Form 22C-1 Line 14)	\$1,083.33

State the following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$0.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	\$0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$0.00
4. Total from Schedule F		\$10,798.09
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$ 10,798.09

B6 Declaration (Official Form 6 - Declaration) (12/14)

n re <i>Stephenson Bonaparte</i>	Case No.
Debtor	(if known)
DECLARATION CONCERNING	DEBTOR'S SCHEDULES
DECLARATION UNDER PENALTY OF PER	JURY BY AN INDIVIDUAL DEBTOR
I declare under penalty of perjury that I have read the foregoing summary and schedu correct to the best of my knowledge, information and belief.	ules, consisting of sheets, and that they are true and
Date: 1/27/2015 Signature /s/ Stepher	nson Bonaparte
Stephenson	
[If joint case, both spot	ises must sign.]
Penalty for making a false statement or concealing property: Fine of up to \$500,000 c	or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.
CERTIFICATION AND SIGNATURE OF NON-ATTORNEY BANK	RUPTCY PETITION PREPARER (See 11.U.S.C. § 110)
I certify that I am a bankruptcy preparer as defined in 11 U.S.C. § 110, that I prepared this with a copy of this document.	
Preparer:	Social security No. :
Names and Social Security numbers of all other individuals who prepared or assisted in pr	reparing this document:
If more than one person prepared this document, attach additional signed sheets conform	ng to the appropriate Official Form for each person
	g to and appropriate official rotterior odder person.
X	Date:

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

FORM B6A (Official Form 6A) (12/07)

No continuation sheets attached

In re Stephenson Bonaparte	Case No.
Debtor(s)	(if known)

SCHEDULE A-REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G-Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property	Nature of Debtor's Interest in Property Husbar Wi Jo	eW ntJ	Current Value of Debtor's Interest, in Property Without Deducting any Secured Claim or Exemption	Amount of Secured Claim
None				None

TOTAL \$ 0.00 (Report also on Summary of Schedules.)

B6B (Official Form 6B) (12/07)

In re Stephenson Bonaparte	Case No.
Debtor(s)	(if known)

SCHEDULE B-PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G-Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Type of Property	N o n e	Description and Location of Property	Husband- Wife- Joint- Community-	W J	Current Value of Debtor's Interest, in Property Without Deducting any Secured Claim or Exemption
1. Cash on hand.		Cash on Hand Location: In debtor's possession			\$20.00
Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		JP Morgan Chase Location: In debtor's possession			\$87.00
Security deposits with public utilities, telephone companies, landlords, and others. Household goods and furnishings, including audio, video, and computer equipment.	X	Furniture Location: In debtor's possession			\$500.00
 5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles. 6. Wearing apparel. 	x	Clothing Location: In debtor's possession			\$250.00
7. Furs and jewelry.	x				
Firearms and sports, photographic, and other hobby equipment.	X				
Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X				
10. Annuities. Itemize and name each issuer.	X				
11. Interest in an education IRA as defined in 26 U.S.C. 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. 521(c).)	X				

B6B (Official Form 6B) (12/07)

In re Stephenson Bonaparte	Case No.	
Debtor(s)	,	(if known)

SCHEDULE B-PERSONAL PROPERTY

		(Continuation Sheet)		
Type of Property	N	Description and Location of Property		Current Value
	0			of Debtor's Interest, in Property Without
	n		andH VifeV	Deducting any
	e		ointJ	Evomption
		Commu	nityC	'
Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X			
Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
Interests in partnerships or joint ventures. Itemize.	X			
Government and corporate bonds and other negotiable and non-negotiable instruments.	X			
16. Accounts Receivable.	X			
17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule of Real Property.	X			
20. Contingent and non-contingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
22. Patents, copyrights, and other intellectual property. Give particulars.	X			
23. Licenses, franchises, and other general intangibles. Give particulars.	X			
24. Customer lists or other compilations containing personally identifiable information (as described in 11 U.S.C. 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25. Automobiles, trucks, trailers and other vehicles and accessories.	X			
26. Boats, motors, and accessories.	X			
27. Aircraft and accessories.	x			
28. Office equipment, furnishings, and supplies.		Laptop Location: In debtor's possession		\$150.00

B6B (Official Form 6B) (12/07)

In re	Stephenson Bonaparte	. Case No.	
'-	Debtor(s)	,	(if known)

SCHEDULE B-PERSONAL PROPERTY

		(Continuation Sheet)			
Type of Property	N	Description and Location of Property			Current Value of Debtor's Interest,
	o n e		Husband- Wife- Joint- Community-	-W J	in Property Without Deducting any Secured Claim or Exemption
29. Machinery, fixtures, equipment and supplies used in business.	X				
30. Inventory.	x				
31. Animals.	X				
32. Crops - growing or harvested. Give particulars.	X				
33. Farming equipment and implements.	X				
34. Farm supplies, chemicals, and feed.	X				
35. Other personal property of any kind not already listed. Itemize.	X				

B6C (Official Form 6C) (04/13)

In	re		

0 Stephenson Bonaparte	Case No.
Dehtor(s)	(if known)

SCHEDULE C-PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:	☐ Check if debtor claims a homestead exemption that exceeds \$155,675.*
(Check one hox)	

☐ 11 U.S.C. § 522(b) (2) ☐ 11 U.S.C. § 522(b) (3)

Description of Property	Specify Law Providing each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemptions
Cash on Hand	N.Y. Civ. Prac. Law and Rules §5205 (a)(9)	\$ 20.00	\$ 20.00
Bank Deposit	N.Y. Civ. Prac. Law and Rules §5205	\$ 87.00	\$ 87.00
Furniture	N.Y. Civ. Prac. Law and Rules §5205 (a)(5)	\$ 500.00	\$ 500.00
Clothing	N.Y. Civ. Prac. Law and Rules §5205 (a)(5)	\$ 250.00	\$ 250.00
Laptop	N.Y. Civ. Prac. Law and Rules §5205 (a)(7)	\$ 150.00	\$ 150.00
Page No. <u>1</u> of <u>1</u>			

^{*} Amount subject to adjustment on 4/1/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

B6D (Official Form 6D) (12/07)

In reStephenson Bonaparte	. Case No.
Debtor(s)	(if known)

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H – Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

🛛 Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Creditor's Name and Mailing Address Including ZIP Code and Account Number (See Instructions Above.)	Co-Debtor	of Va HH WV	Lien, and D	s Incurred, Nature escription and Market erty Subject to Lien	Contingent	Unliquidated	Disputed	Amount of Claim Without Deducting Value of Collateral	Unsecured Portion, If Any
Account No:									
Account No:			Value:						
No continuation sheets attached			Value:	(T. (Use or	Subtential of the	is pa	age) II \$	\$ 0.00 \$ 0.00	

Schedules.)

Statistical Summary of Certain Liabilities and Related Data)

B6E (Official Form 6E) (04/13)

In re_Stephenson_Bonaparte_______, Case No._______

Debtor(s)

(if known)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	, a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).
or th	If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them be marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community." If claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If laim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)
in the	Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.
	Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts ed to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily umer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.
	Report the total of amounts NOT entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all unts not entitled to priority listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Individual debtors with arily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.
\boxtimes	Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.
TYP	ES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)
	Domestic Support Obligations Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
	Extensions of credit in an involuntary case Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).
	Wages, salaries, and commissions Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).
	Contributions to employee benefit plans Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).
	Certain farmers and fishermen Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
	Deposits by individuals Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).
	Taxes and Certain Other Debts Owed to Governmental Units Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).
	Commitments to Maintain the Capital of an Insured Depository Institution Claims based on commitments to FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).
	Claims for Death or Personal Injury While Debtor Was Intoxicated Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol a drug or another substance 11 U.S.C. 8 507(a)(10)

^{*} Amounts are subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

B6F (Official Form 6F) (12/07)

In re Stephenson Bonaparte	, Ca	ase No.
Debtor(s)		(if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedules. Report this total also on the Summary of Schedules, and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F

Creditor's Name, Mailing Address including Zip Code, And Account Number (See instructions above.)		and (Claim was Incurred, Consideration for Claim. iim is Subject to Setoff, so State.	Contingent	Unliquidated	Disputed	Amount of Claim
Account No: 5879	İ	2012-1	2-01				\$ 459.00
Creditor # : 1 Hsbc Bank Nevad							
Account No: 5879							
Representing: Hsbc Bank Nevad		7 SKYL	Y PORTFOLIO SE INE DR 3RD FLOOR RN NY 10532				
Account No: 1562		2013-02	2-02				\$ 200.00
Creditor # : 2 Kay Jewelers 375 Ghent Rd Fairlawn OH 44333							·
2 continuation sheets attached				Sub	ota	\$	\$ 659.00

Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related

B6F (Official Form 6F) (12/07) - Cont.

n re Stephenson Bonaparte	,	Case No.	
D - I. (/-)		' 	

Debtor(s)

(if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

Creditor's Name, Mailing Address including Zip Code, And Account Number (See instructions above.)	Co-Debtor	J	Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State. Husband Wife Boint Community	Contingent	Unliquidated	Disputed	Amount of Claim
Account No: 3747 Creditor # : 3 Syncb/care Credit 950 Forrer Blvd Kettering OH 45420			2014-04-18				\$ 800.00
Account No: 8037 Creditor # : 4 Toyota Motor Credit			10/29/2014 Auto Loan				\$ 3,150.09
Account No: 8037 Representing: Toyota Motor Credit			Rubin & Rothman, LLC 1787 Veterans Highway, #32 P.O. Box 9003 Islandia NY 11749				
Account No: 0001 Creditor # : 5 Toyota Motor Credit 4 Gatehall Dr Ste 350 Parsippany NJ 07054		J	2008-04-07				\$ 451.00
Account No: 0001 Creditor # : 6 Toyota Motor Credit 4 Gatehall Dr Ste 350 Parsippany NJ 07054			2007-12-12				\$ 4,637.00
Sheet No. 1 of 2 continuation sheets at Creditors Holding Unsecured Nonpriority Claims	tached	to So	chedule of (Use only on last page of the completed Schedule F. Reports Schedules and, if applicable, on the Statistical Summary of Certain	ort also on Sui	Tot	al \$	\$ 9,038.09

B6F (Official Form 6F) (12/07) - Cont.

n re Stephenson Bonaparte	, Case No.	

Debtor(s)

(if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

Creditor's Name, Mailing Address including Zip Code, And Account Number (See instructions above.)	Co-Debtor	J(Date Claim was Incurred, and Consideration for Claim. If Claim is Subject to Setoff, so State. Husband Wife oint Community	Contingent	Unliquidated	Disputed	Amount of Claim
Account No: 0001 Creditor # : 7 Toyota Motor Credit Co 19001 S Western Ave Torrance CA 90501		J	2008-04-05				\$ 1,101.00
Account No: 4040 Creditor # : 8 Toyota Motor Credit Corp. P. O. Box 5236 Carol Stream IL 60197			2/9/2009 Auto Loan for the vehicle repossessed.				Unknown
Account No: 4040 Representing: Toyota Motor Credit Corp.			United Recovery Systems, LP P. O. Box 722929 Houston TX 77272				
Account No:							
Account No:							
Sheet No. 2 of 2 continuation sheets at Creditors Holding Unsecured Nonpriority Claims	tached t	o So	chedule of (Use only on last page of the completed Schedule F. Report Schedules and, if applicable, on the Statistical Summary of Certain L	also on Sur	Tot	al \$ ary of	\$ 1,101.00 \$ 10,798.09

B6G (Official Form 6G) (12/07)

In re Stephenson Bonaparte	/ Debtor	Case No.	
		•	(if known)

SCHEDULE G-EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State the nature of debtor's interests in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

□ Check this box if the debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract.	Description of Contract or Lease and Nature of Debtor's Interest. State whether Lease is for Nonresidential Real Property. State Contract Number of any Government Contract.

B6H (Official Form 6H) (12/07)

n re Stephenson Bonaparte	/ Debtor	Case No.	
		_	(if known)

SCHEDULE H-CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preeceding the commencement of the case, identify the name of the debtors spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

□ Check this box if the debtor has no codebtors.

Name and Address of Codebtor	Name and Address of Creditor

Fill in this information to identify	your case:			
Stephenson Bonapa	rte			
First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing) First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:	EASTERNDistrict o	of NEW YORK		
Case number			Check if the	nis is:
(II KIIOWII)				ended filing
				plement showing post-petition er 13 income as of the following date:
Official Form B 6I			MM / DD	
Schedule I: You	ır Income			42/42
				or 2), both are equally responsible for
	use is not filing with you, on the top of any additional pag	do not include inf	ormation about your spo	ou, include information about your spouse use. If more space is needed, attach a nown). Answer every question.
1. Fill in your employment information.		Debtor 1		Debtor 2 or non-filing spouse
If you have more than one job, attach a separate page with information about additional employers.	Employment status	Employed Not employed	ed	Employed Not employed
Include part-time, seasonal, or self-employed work.		5 .		
Occupation may Include student or homemaker, if it applies.	Occupation	Pastor		
	Employer's name	Kng Solomon	Religious Supplies	
	Employer's address	1083 Rutland	Road	
		Number Street		Number Street
		Brooklyn	NY 11212 State ZIP Code	City State ZIP Code
	How long employed the	City	State ZIP Code	City State ZIP Code
	now long employed the	re? 6 years		
Part 2: Give Details About	Monthly Income			
		n. If you have nothi	ng to report for any line, w	rite \$0 in the space. Include your non-filing
spouse unless you are separated If you or your non-filing spouse ha	ave more than one employe		rmation for all employers for	or that person on the lines
below. If you need more space, a	ttach a separate sheet to th	ils form.		
			For Debtor 1	For Debtor 2 or non-filing spouse
List monthly gross wages, sal deductions). If not paid monthly,			2. \$1083.33_	\$0.00
3. Estimate and list monthly over	rtime pay.		3. + \$0.00_	+ \$0.00_
4. Calculate gross income. Add li	ne 2 + line 3.		4. \$\ \ \\$\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	\$0.00

Official Form B 6I Schedule I: Your Income page 1

Debtor 1

Stephenson Bonaparte

Stephenson Bonaparte			Case number (if known)
First Name	Middle Name	Last Name	· /

			Foi	Debtor 1		For Deb	tor 2 or g spouse		
C	opy line 4 here	→ 4.	\$	1083.33		\$	0.00		
5. L	st all payroll deductions:								
	5a. Tax, Medicare, and Social Security deductions	5a.	\$	0.00		\$	0.00		
	5b. Mandatory contributions for retirement plans	5b.	\$	0.00		\$	0.00		
	5c. Voluntary contributions for retirement plans	5c.	\$	0.00		\$	0.00		
	5d. Required repayments of retirement fund loans	5d.	\$	0.00		\$	0.00		
	5e. Insurance	5e.	\$	0.00		\$	0.00		
	5f. Domestic support obligations	5f.	\$	0.00		\$	0.00		
	5g. Union dues	5g.	\$	0.00		\$	0.00		
	5h. Other deductions. Specify:	5h.	+\$_	0.00		+ \$	0.00		
6.	Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g +5h.	6.	\$	0.00		\$	0.00		
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	1083.33		\$	0.00		
8. L	ist all other income regularly received:								
	8a. Net income from rental property and from operating a business, profession, or farm								
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00		\$	0.00		
	8b. Interest and dividends	8b.	\$	0.00		\$	0.00		
	8c. Family support payments that you, a non-filing spouse, or a dependence regularly receive	ent							
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00		\$	0.00		
	8d. Unemployment compensation	8d.	\$	0.00		\$	0.00		
	8e. Social Security	8e.	\$	0.00		\$	0.00		
	8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistar that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	nce 8f.	\$	0.00		\$	0.00		
	8g. Pension or retirement income	8g.	\$	0.00		\$	0.00		
	8h. Other monthly income. Specify:	8h.	+\$	0.00		+\$	0.00		
			T \$_	0.00			0.00		
9.	Add all other income . Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$	0.00		\$	0.00		
	alculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$	1,083.33	+	\$	0.00	= \$	1083.33
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.									
	Oo not include any amounts already included in lines 2-10 or amounts that are	not a	vailable	e to pay expe	nses	s listed in			0.00
	Specify:							+ \$	0.00
	2. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12.								
13.	Do you expect an increase or decrease within the year after you file this	form?	•						bined thly income
	No. Yes. Explain:								

Fill in this info	rmation to identify y	our case:				
	tephenson Bonaparte		Ch	eck if this is:		
Debtor 2	rst Name	Middle Name Last Name		1	ling	
(Spouse, if filing) Fire		Middle Name Last Name		An amended fi	•	petition chapter 13
United States Ban	nkruptcy Court for the: EA	ASTERNDistrict of NEW YOU	RK L	expenses as o		
Case number				MM / DD / YYYY		
(If known)						because Debtor 2
Official Fo	orm B 6J			maintains a se	parate househ	old
Schedu	ıle J: You	ır Expenses				12/13
information. If m	-	sible. If two married people are filir I, attach another sheet to this form.				_
Part 1: De	escribe Your Hous	ehold				
	line 2. Debtor 2 live in a se	parate household? a separate Schedule J.				
2. Do you have o	dependents?	No				
Do not list Deb Debtor 2.	-	Yes. Fill out this information for each dependent	Dependent's relationsh Debtor 1 or Debtor 2	ip to	Dependent's age	Does dependent live with you?
Do not state th names.	e dependents'	·	wife		54	No ✓ Yes
						No
						Yes
						∐ No ☐ Yes
						No
						Yes
						No
						Yes
	nses include beople other than your dependents?	✓ No Yes				
Part 2: Estir	mate Your Ongoin	g Monthly Expenses				
expenses as of a	a date after the bank	pankruptcy filing date unless you ar ruptcy is filed. If this is a suppleme	_		-	
applicable date.			. Lucano tha make			
•	•	cash government assistance if you ed it on <i>Schedule I: Your Income</i> (O			Your exper	ises
	home ownership ex ne ground or lot.	penses for your residence. Include	first mortgage payment	ts and 4.	\$	950.00
If not include	ed in line 4:					
4a. Real est	tate taxes			4a.	\$	0.00
4b. Property	y, homeowner's, or rer	nter's insurance		4b.	\$	0.00
4c. Home m	naintenance, repair, ar	nd upkeep expenses		4c.	\$	0.00
4d. Homeov	wner's association or o	condominium dues		4d.	\$	0.00

Debtor 1

Stephenson Bonaparte

First Name Middle Name Last Name

Case number (if known)______

			Your ex	rpenses
5.	Additional mortgage payments for your residence, such as home equity loans	5.	\$	0.00
6.	Utilities:			
0.	6a. Electricity, heat, natural gas	6a.	\$	0.00
	6b. Water, sewer, garbage collection	6b.	\$	0.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	200.00
	6d. Other. Specify:	6d.	\$	0.00
7.	Food and housekeeping supplies	7.	\$	300.00
8.	Childcare and children's education costs	8.	\$	0.00
9.	Clothing, laundry, and dry cleaning	9.	\$	30.00
10.	Personal care products and services	10.	\$	30.00
11.	Medical and dental expenses	11.	\$	0.00
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$	150.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
14.	Charitable contributions and religious donations	14.	\$	60.00
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	\$	0.00
	15b. Health insurance	15b.	\$	0.00
	15c. Vehicle insurance	15c.	\$	475.00
	15d. Other insurance. Specify:	15d.	\$	0.00
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$	0.00
17.	Installment or lease payments:			
	17a. Car payments for Vehicle 1	17a.	\$	0.00
	17b. Car payments for Vehicle 2	17b.	\$	0.00
	17c. Other. Specify:	17c.	\$	0.00
	17d. Other. Specify:	17d.	\$	0.00
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form B 6I).	18.	\$	0.00
19.	Other payments you make to support others who do not live with you.	19.	¢	0.00
	Specify:	19.	\$	
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Included	ome.		
	20a. Mortgages on other property	20a.	\$	
	20b. Real estate taxes	20b.	\$	
	20c. Property, homeowner's, or renter's insurance	20c.	\$	
	20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	20e. Homeowner's association or condominium dues	20e.	\$	0.00

Debtor 1	Stephens	on Bonaparte	Case number (if known)			
First Name Middle Name Last Name			ii kilowiij				
21. Other.	Specify:				21.	+\$	0.00
		nses. Add lines 4 nthly expenses.	through 21.		22.	\$	2195.00
	•	hly net income.	nthly income) from Sched	ule I.	23a.	\$	1083.33
23b. Co	opy your mon	thly expenses fro	m line 22 above.		23b.	-\$	2195.00
	•	onthly expenses ur <i>monthly net in</i>	from your monthly income come.).	23c.	\$	-1111.67
For exar	mple, do you e	expect to finish paincrease or decre	aying for your car loan witl	hin the year after you file this form? in the year or do you expect your ation to the terms of your mortgage?			

B 8 (Official Form 8) (12/08)

UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF NEW YORK

nre Stephenson Bonaparte		Case No. Chapter 7				
	/ D	Debtor				
	CHAPTER 7 STATEMENT OF INTER	NTION				
Part A - Debts Secured by property of Attach additional pages if nec	f the estate. (Part A must be completed for EACH debt which is cessary.)	s secured by property of the estate.				
roperty No.						
Creditor's Name : None	Describe Property S	Securing Debt :				
Property is (check one) : Claimed as exempt N	Not claimed as exempt unexpired leases. (All three columns of Part B must be complete	_ (for example, avoid lien using 11 U.S.C § 522 (f)). ed for each unexpired lease. Attach				
roperty No. Lessor's Name: None	Describe Leased Property:	Lease will be assumed pursuant to 11 U.S.C. § 365(p)(2):				
I declare under penalty of perjury th and/or personal property subject to Date:	Signature of Debtor(s) hat the above indicates my intention as to any property of o an unexpired lease. Debtor: /s/ Stephenson Bonapa.					

B 7 (Official Form 7) (4/13)

UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF NEW YORK

In re:Stephenson Bonaparte	Case No.
Debtor	(if known)

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not diclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

Questions 1-18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19-25. If the answer to an applicable question is "None," mark the box labeled "None." If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within the six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor my also be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporation debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. §101(2), (31).

1. Income from employment or operation of business

part-time commence

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the two years immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

Year to date:\$2,166.66 Last Year:\$13,000 Year before:\$13,000

2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

B7 - (Official Form 7) (4/13)

3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

 \boxtimes

a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor, made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None \boxtimes

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225*. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filingunder chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None \boxtimes

c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT

AND CASE NUMBER

NATURE OF **PROCEEDING** COURT OR AGENCY AND LOCATION

STATUS OR DISPOSITION

Pendiing

Toyota Motor Credit

OF CREDITOR OR SELLER

v. Stephenson R Bonaparte

Case No.: CV-060316-13/KI

Auto Loan

Civil Court of the City of New York, Kings County, 141 Livingston Street, Brooklyn, New York

None \boxtimes

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATE OF

REPOSSESSION

NAME AND ADDRESS FORECLOSURE SALE,

> DESCRIPTION AND VALUE OF PROPERTY TRANSFER OR RETURN

Name: Toyota Motor Credit May 2014 Description: Auto Loan

^{*} Amounts are subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

Case 1-15-40751-nhl Filed 02/25/15 Entered 02/25/15 10:22:27 Doc 1

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NAME AND ADDRESS OF CREDITOR OR SELLER DATE OF REPOSSESSION FORECLOSURE SALE. TRANSFER OR RETURN

DESCRIPTION AND VALUE OF PROPERTY

Corporation Address: C/O Toyota Finance Service

P. O. Box 371339,

Pittsburgh, PA 15250-7339

Value of property: :\$1,101.48

6. Assignments and receiverships

None \boxtimes

a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None \boxtimes

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

7. Gifts

None \boxtimes

List all gifts or charitable contributions made within one year immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

8. Losses

None \bowtie

List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within one year immediately preceding the commencement this case.

NAME AND ADDRESS OF PAYEE

DATE OF PAYMENT. AMOUNT OF MONEY OR NAME OF PAYER IF OTHER THAN DEBTOR DESCRIPTION AND VALUE OF PROPERTY

Payee: Raymond Ragues

Date of Payment:

\$725.00

Address:

33 Gold Street, Suite 620

New York, NY 10038

Payor: Stephenson Bonaparte

10. Other transfers

None \boxtimes

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

B7 - (Official Form 7) (4/13)

None

b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a benificiary.

11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

15. Prior address of debtor

None

If the debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

17. Environmental Information

None

For the purpose of this question, the following definitions apply:

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"Environmental Law" means any federal, state, or local statute or regulation regulation, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor,

including, but not limited to disposal sites.

B7 - (Official Form 7) (4/1)	B7 -	(Official	Form 7	') (4/13
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"Hazardous Material" means anything defined as hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar termunder an Environmental Law:

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

Non
X

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

None

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law, with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

18. Nature, location and name of business

None

a. If the debtor is an individual, list the names, addresses, taxpayer-identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencment of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencment of this case.

None

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

(if any)

 \boxtimes

[If completed by an individual or individual and spouse]

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date	Signature /s/ Stephenson Bonaparte
	of Debtor
Date	Signature
Dale	of Joint Debtor

B7 - (Official Form 7) (4/13)

DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)

Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer	Social-Security No.(Required by 11 U.S.C. § 110.)
If the bankruptcy petition preparer is not an individual, state the name, title (if any), a person, or partner who signs this document.	nddress, and social-security number of the officer, principal,, responsible
Address	
Address X	
	Date
x	Date
x	

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 18 U.S.C. § 156.

Rule 2016(b) (8/91)

UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF NEW YORK

ln r	stephenson Bonaparte	Case No. Chapter 7		
		/ Debtor		
	Attorney for Debtor: Raymond Ragues			
	STATEMENT PURSUANT TO	RULE 2016(B)		
The	e undersigned, pursuant to Rule 2016(b), Bankruptcy Rules, states t	that:		
1.	The undersigned is the attorney for the debtor(s) in this case.			
2.	 The compensation paid or agreed to be paid by the debtor(s), to the a) For legal services rendered or to be rendered in contemplation connection with this case	n of and in \$		
	c) The unpaid balance due and payable is			
3.	\$of the filing fee in this case has been paid.			
4.	 The Services rendered or to be rendered include the following: a) Analysis of the financial situation, and rendering advice and assistance to the debtor(s) in determining whether to file a petition under title 11 of the United States Code. b) Preparation and filing of the petition, schedules, statement of financial affairs and other documents required by the court. c) Representation of the debtor(s) at the meeting of creditors. 			
5.	The source of payments made by the debtor(s) to the undersigned services performed, and <pre>None other</pre>	l was from earnings, wages ar	nd compensation for	
6.	The source of payments to be made by the debtor(s) to the understee be from earnings, wages and compensation for services performed None other	•	remaining, if any, will	
7.	The undersigned has received no transfer, assignment or pledge of property from debtor(s) except the following for the value stated: None			
8.	The undersigned has not shared or agreed to share with any other law firm, any compensation paid or to be paid except as follows: None	entity, other than with member	ers of undersigned's	
Dat	Respectfully submitted,			
	X/s/ Raymond Ragues Attorney for Petitioner: Raymond Ragues Ragues PLLC 33 Gold Street, Suite New York NY 10038	620		

212-766-1100

UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF NEW YORK

Case No.

In re Stephenson Bonaparte	Case No.
	Chapter 7
	/ Debtor
Attorney for Debtor: Raymond Ragues	
VERIFIC	CATION OF CREDITOR MATRIX
The above named Debtor(s) he	ereby verify that the attached list of creditors is true and correct to the
best of our knowledge.	
· ·	
Date:	/s/ Stephenson Bonaparte
	Debtor

CAVALRY PORTFOLIO SE 7 SKYLINE DR 3RD FLOOR HAWTHORN, NY 10532

Hsbc Bank Nevad

Kay Jewelers
375 Ghent Rd
Fairlawn, OH 44333

Rubin & Rothman, LLC 1787 Veterans Highway, #3 P.O. Box 9003 Islandia, NY 11749

Syncb/care Credit 950 Forrer Blvd Kettering, OH 45420

Toyota Motor Credit

Toyota Motor Credit 4 Gatehall Dr Ste 350 Parsippany, NJ 07054

Toyota Motor Credit Co 19001 S Western Ave Torrance, CA 90501

Toyota Motor Credit Corp. P. O. Box 5236 Carol Stream, IL 60197

United Recovery Systems, P. O. Box 722929 Houston, TX 77272